

ADHS Intake and Service Planning Principles

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Understanding the Changes

Its not about the paper!

Best practice is telling us:

Assessments/Services for all populations must be:

- strength-based
- family-focused
- culturally-sensitive



• Consumers and those closest to them must be active participants in the assessment process and in the development of the service plan, not passive recipients of a plan devised and imposed by the "experts" who are assumed to know more about the needs, values, priorities and strengths of the consumer than the consumer him/herself.

- Services need not be exclusively professionally based. Treatment considerations must extend beyond the clinicians' offices and out to the community at large.
- Natural supports, community resources, as well as paid supports, should be included in all treatment planning.

 The team requires ongoing input from behavioral health representatives competent to consult, advise, review and inform the team on issues of best practice, clinical alternatives, likely outcomes, reasonable expectations, etc.

 When given the opportunity to participate in treatment planning and secure the services they define as necessary, care, compliance and outcomes improve.

Understanding the Changes It's about the Philosophy!

The Philosophy

Embraces a service delivery model that is:

- Welcoming and engages the person in the assessment and service delivery process
- Strengths-based, culturally competent and gender appropriate
- Comprehensive and flexible enough to meet the individual needs of the person and their family members

Assessments & Service Planning Principles

- 1. Are developed with the understanding that the system has an unconditional commitment to the persons and families enrolled in the service delivery system.
- 2. Begin with empathetic relationships that foster ongoing partnerships and expect equality and respect throughout the service delivery system.

Principles

- 3. Are developed collaboratively to engage and empower persons and their families, include other individuals involved in the person's life, include meaningful choice and are accepted by the person.
- 4. Are individualized, strength-based and clinically sound.

Principles

5. Are developed with the expectation that the person is capable of positive change, growth and leading a life of value.

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